S. 883

To amend title XIX of the Social Security Act to revise and simplify the transitional medical assistance (TMA) program.

IN THE SENATE OF THE UNITED STATES

APRIL 10, 2003

Mr. Breaux (for himself, Mr. Chafee, Mr. Bingaman, Ms. Landrieu, Mr. Lieberman, Mrs. Clinton, Mr. Miller, and Mr. Graham of Florida) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

- To amend title XIX of the Social Security Act to revise and simplify the transitional medical assistance (TMA) program.
 - 1 Be it enacted by the Senate and House of Representa-
 - 2 tives of the United States of America in Congress assembled,
 - 3 **SECTION 1. SHORT TITLE.**
 - 4 This Act may be cited as the "Transitional Medical
 - 5 Assistance Improvement Act of 2003".

1	SEC. 2. REVISION AND SIMPLIFICATION OF THE TRANSI-
2	TIONAL MEDICAL ASSISTANCE PROGRAM
3	(TMA).
4	(a) Option of Continuous Eligibility for 12
5	Months; Option of Continuing Coverage for Up To
6	AN ADDITIONAL YEAR.—
7	(1) Option of continuous eligibility for
8	12 MONTHS BY MAKING REPORTING REQUIREMENTS
9	OPTIONAL.—Section 1925(b) of the Social Security
10	Act (42 U.S.C. 1396r-6(b)) is amended—
11	(A) in paragraph (1), by inserting ", at the
12	option of a State," after "and which";
13	(B) in paragraph (2)(A), by inserting
14	"Subject to subparagraph (C):" after "(A) No-
15	TICES.—";
16	(C) in paragraph (2)(B), by inserting
17	"Subject to subparagraph (C):" after "(B) Re-
18	PORTING REQUIREMENTS.—";
19	(D) by adding at the end the following new
20	subparagraph:
21	"(C) STATE OPTION TO WAIVE NOTICE
22	AND REPORTING REQUIREMENTS.—A State
23	may waive some or all of the reporting require-
24	ments under clauses (i) and (ii) of subpara-
25	graph (B). Insofar as it waives such a reporting
26	requirement, the State need not provide for a

1	notice under subparagraph (A) relating to such
2	requirement."; and
3	(E) in paragraph (3)(A)(iii), by inserting
4	"the State has not waived under paragraph
5	(2)(C) the reporting requirement with respect
6	to such month under paragraph (2)(B) and if"
7	after "6-month period if".
8	(2) State option to extend eligibility
9	FOR LOW-INCOME INDIVIDUALS FOR UP TO 12 ADDI-
10	TIONAL MONTHS.—Section 1925 of such Act (42
11	U.S.C. 1396r-6) is further amended—
12	(A) by redesignating subsections (c)
13	through (f) as subsections (d) through (g), re-
14	spectively; and
15	(B) by inserting after subsection (b) the
16	following new subsection:
17	"(c) State Option of Up To 12 Months of Addi-
18	TIONAL ELIGIBILITY.—
19	"(1) In General.—Notwithstanding any other
20	provision of this title, each State plan approved
21	under this title may provide, at the option of the
22	State, that the State shall offer to each family which
23	received assistance during the entire 6-month period
24	under subsection (b) and which meets the applicable
25	requirement of paragraph (2), in the last month of

the period the option of extending coverage under this subsection for the succeeding period not to exceed 12 months.

"(2) Income restriction.—The option under paragraph (1) shall not be made available to a family for a succeeding period unless the State determines that the family's average gross monthly earnings (less such costs for such child care as is necessary for the employment of the caretaker relative) as of the end of the 6-month period under subsection (b) does not exceed 185 percent of the official poverty line (as defined by the Office of Management and Budget, and revised annually in accordance with section 673(2) of the Omnibus Budget Reconciliation Act of 1981) applicable to a family of the size involved.

"(3) APPLICATION OF EXTENSION RULES.—
The provisions of paragraphs (2), (3), (4), and (5) of subsection (b) shall apply to the extension provided under this subsection in the same manner as they apply to the extension provided under subsection (b)(1), except that for purposes of this subsection—

"(A) any reference to a 6-month period under subsection (b)(1) is deemed a reference

- to the extension period provided under paragraph (1) and any deadlines for any notices or
 reporting and the premium payment periods
 shall be modified to correspond to the appropriate calendar quarters of coverage provided
 under this subsection; and
 "(B) any reference to a provision of sub-
- 7 "(B) any reference to a provision of sub-8 section (a) or (b) is deemed a reference to the 9 corresponding provision of subsection (b) or of 10 this subsection, respectively.".
- 11 (b) STATE OPTION TO WAIVE RECEIPT OF MED-12 ICAID FOR 3 OF PREVIOUS 6 MONTHS TO QUALIFY FOR TMA.—Section 1925(a)(1) of such Act (42 U.S.C. 1396r– 13 6(a)(1) is amended by adding at the end the following: 14 15 "A State may, at its option, also apply the previous sentence in the case of a family that was receiving such aid 16 for fewer than 3 months, or that had applied for and was 18 eligible for such aid for fewer than 3 months, during the 19 6 immediately preceding months described in such sen-
- 21 (c) Elimination of Sunset for TMA.—
- 22 (1) Subsection (g) of section 1925 of such Act 23 (42 U.S.C. 1396r-6), as redesignated under sub-24 section (a)(2), is repealed.

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tence.".

1	(2) Section 1902(e)(1) of such Act (42 U.S.C.
2	1396a(e)(1)) is amended by striking "(A) Notwith-
3	standing" and all that follows through "During such
4	period, for" in subparagraph (B) and inserting
5	"For".
6	(d) CMS REPORT ON ENROLLMENT AND PARTICIPA-
7	TION RATES UNDER TMA.—Section 1925 of such Act (42
8	U.S.C. 1396r-6), as amended by subsections (a)(2)(A)
9	and (c)(1), is amended by inserting after subsection (f)
10	the following:
11	"(g) Additional Provisions.—
12	"(1) Collection and reporting of partici-
13	PATION INFORMATION.—Each State shall—
14	"(A) collect and submit to the Secretary,
15	in a format specified by the Secretary, informa-
16	tion on average monthly enrollment and average
17	monthly participation rates for adults and chil-
18	dren under this section; and
19	"(B) make such information publicly avail-
20	able.
21	Such information shall be submitted under subpara-
22	graph (A) at the same time and frequency in which
23	other enrollment information under this title is sub-
24	mitted to the Secretary. Using such information, the

- 1 Secretary shall submit to Congress annual reports
- 2 concerning such rates.".
- 3 (e) Coordination of Work.—Section 1925(g) of
- 4 such Act (42 U.S.C. 1396r-6(g)), as added by subsection
- 5 (d), is amended by adding at the end the following new
- 6 paragraph:
- 7 "(2) COORDINATION WITH ADMINISTRATION
- 8 FOR CHILDREN AND FAMILIES.—The Administrator
- 9 of the Centers for Medicare & Medicaid Services, in
- 10 carrying out this section, shall work with the Assist-
- ant Secretary for the Administration for Children
- and Families to develop guidance or other technical
- assistance for States regarding best practices in
- 14 guaranteeing access to transitional medical assist-
- ance under this section.".
- 16 (f) Elimination of TMA Requirement for
- 17 States That Extend Coverage to Children and
- 18 Parents Through 185 Percent of Poverty.—
- 19 (1) IN GENERAL.—Section 1925 of such Act
- 20 (42 U.S.C. 1396r–6) is further amended by adding
- at the end the following:
- 22 "(h) Provisions Optional for States That Ex-
- 23 TEND COVERAGE TO CHILDREN AND PARENTS THROUGH
- 24 185 Percent of Poverty.—A State may meet (but is
- 25 not required to meet) the requirements of subsections (a)

- 1 and (b) if it provides for medical assistance under section
- 2 1931 to families (including both children and caretaker
- 3 relatives) the average gross monthly earning of which (less
- 4 such costs for such child care as is necessary for the em-
- 5 ployment of a caretaker relative) is at or below a level that
- 6 is at least 185 percent of the official poverty line (as de-
- 7 fined by the Office of Management and Budget, and re-
- 8 vised annually in accordance with section 673(2) of the
- 9 Omnibus Budget Reconciliation Act of 1981) applicable
- 10 to a family of the size involved.".
- 11 (2) Conforming amendments.—Section 1925
- of such Act (42 U.S.C. 1396r-6) is further amend-
- ed, in subsections (a)(1) and (b)(1), by inserting ",
- but subject to subsection (h)," after "Notwith-
- standing any other provision of this title," each
- place it appears.
- 17 (g) Requirement of Notice for All Families
- 18 Losing TANF.—Subsection (a)(2) of section 1925 of
- 19 such Act (42 U.S.C. 1396r-6) is amended by adding at
- 20 the end the following flush sentences:
- 21 "Each State shall provide, to families whose aid
- 22 under part A or E of title IV has terminated but
- 23 whose eligibility for medical assistance under this
- title continues, written notice of their ongoing eligi-
- 25 bility for such medical assistance. If a State makes

- 1 a determination that any member of a family whose 2 aid under part A or E of title IV is being terminated 3 is also no longer eligible for medical assistance under this title, the notice of such determination shall be 5 supplemented by a 1-page notification form describ-6 ing the different ways in which individuals and fami-7 lies may qualify for such medical assistance and ex-8 plaining that individuals and families do not have to 9 be receiving aid under part A or E of title IV in 10 order to qualify for such medical assistance. Such 11 notice shall further be supplemented by information 12 on how to apply for child health assistance under the 13 State children's health insurance program under 14 title XXI and how to apply for medical assistance 15 under this title.".
- (h) Extending Use of Outstationed Workers
 To Accept Applications for Transitional Medical
 Assistance.—Section 1902(a)(55) of such Act (42
 U.S.C. 1396a(a)(55)) is amended by inserting "and under

21 (i) Effective Dates.—

section 1931" after "(a)(10)(A)(ii)(IX)".

22 (1) IN GENERAL.—Except as provided in this 23 subsection, the amendments made by this section 24 shall apply to calendar quarters beginning on or 25 after October 1, 2002.

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- (2) Notice.—The amendment made by subsection (g) shall take effect 6 months after the date of enactment of this Act.
- DELAY PERMITTED FORSTATE **PLAN** AMENDMENT.—In the case of a State plan for medical assistance under title XIX of the Social Security Act which the Secretary of Health and Human Services determines requires State legislation (other than legislation appropriating funds) in order for the plan to meet the additional requirements imposed by the amendments made by this section, the State plan shall not be regarded as failing to comply with the requirements of such title solely on the basis of its failure to meet these additional requirements before the first day of the first calendar quarter beginning after the close of the first regular session of the State legislature that begins after the date of enactment of this Act. For purposes of the previous sentence, in the case of a State that has a 2-year legislative session, each year of such session shall be deemed to be a separate regular session of the State legislature.

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